Maryland Medicaid Pharmacy Program Drug Use Review (DUR) Board Thursday, June 7, 2012 Meeting Minutes

DUR Board Members: G. Cordts, K. Fink, B. Gilliam, P. Kahn, L. Moricle, E. Munch,

K. O'Reilly, N. Sheth, B. Trentler, W. Van Wie

Maryland Medicaid Pharmacy Program (MMPP): A. Alexandrou, P. Holly, D. Klein, D. Shah,

M. Shook, A. Taylor *Xerox:* K. Farrakhan

Health Information Designs (HID): J. Paradis, J. Walker

Magellan Medicaid Administration: M. Roberts

Introductions

DUR Board members introduced themselves.

An announcement was made that Wi-Fi is now available in the conference room and that attendees will have access to Wi-Fi for future meetings.

Approval of DUR Board Meeting Minutes

Minutes from the March 1, 2012 DUR Board meeting were approved with no changes. DUR Board meeting minutes are now posted on the MMPP website.

Maryland Medicaid Pharmacy Program

Action items from the March 1, 2012 meeting were reviewed. HID reported that a retrospective DUR review of patients on simvastatin 80mg, those with simvastatin drug interactions and those taking citalopram >40mg had been completed. This will be discussed in more detail later in the meeting.

HID reported that a few providers had signed up to receive electronic copies of the newsletter. MMPP urged all Board members to sign up and encouraged them to ask their colleges to do the same. HID also reported that MMPP had contacted chain pharmacy representatives in an effort to improve response rates to DUR educational intervention letters. Beginning this month, a list of which stores were mailed DUR letters will be sent to chain store representatives. No patient information will be included in the mailing, but simply a notice indicating how many letters were sent to each store.

MMPP reported that a hard edit is under development for the use of clonazepam and any other benzodiazepine. This combination is not currently alerted by a therapeutic duplication alert since clonazepam is classified as an anticonvulsant and not a benzodiazepine. The new alert will be able to be by overridden by the pharmacist just as current duplicate therapy alerts.

Prior authorization criteria for the use of telaprevir (Incivek[®]) and boceprevir (Victrelis[®]) (two new drugs for the treatment of hepatitis C) were discussed. Both drugs are included on the Preferred Drug List (PDL). The prior authorization is set up to approve the entire course of therapy. However, in an effort to limit waste in cases where patients do not finish the full course of therapy, only a 28 day supply will be dispensed initially and for each refill. The Board recommended that the criteria be revised to include the treatment of prior non-responders if being re-treated by gastrointestinal or infectious disease specialist. The Board also asked if the prior authorization form could be simplified. The Board unanimously approved the criteria with the recommended changes.

MMPP reported that they continue outreach efforts to pharmacies to ensure that implementation of the underuse of antiretroviral criteria does not result in patients leaving the pharmacy without medication. Each claim that was alerted for late refill of antiretroviral agent and not subsequently followed by a paid claim was reviewed by MMPP and the pharmacy was contacted. Many pharmacies were not familiar with how to process overrides for late refill edits. Board members noted that they inform their patients that it is best to have their antiretroviral medications filled at a pharmacy that is familiar with handling these drugs. Board members also voiced concern over some of the chain pharmacies use of automated refill programs. There was some concern that prescriptions may be filled by the auto refill program but never picked up by the patient and therefore lack of compliance could go unnoticed.

MMPP has obtained an address list from the Board of Pharmacy for all registered pharmacists in Maryland. An updated list of pharmacy addresses is being requested from the Board of Pharmacy as well.

Xerox

It was noted that there was an increase in requests for calcium acetate generic due to the unavailability of the preferred brand drug PhosLo[®]. The top two therapeutic duplications edits were for antipsychotics and anticonvulsants. Top early refill edits were for antidepressants and anti-anxiety drugs. Top drug-drug interaction edits were for SSRIs and other antidepressants. Call center numbers increased slightly over the previous quarter due to implementation of PDL changes.

Health Information Designs

HID completed a retrospective evaluations of high dose citalopram and simvistatin and drug interactions with both drugs. Alert letters were sent to prescribers and pharmacies. Not all prescribers received letters. For those patients who were taking higher doses consistently for

greater than 6 months no letters were sent. The Board recommended that all prescribers be notified of patients taking higher doses of simvastatin and citalopram. HID will rerun the same evaluation in July and send intervention letters to all prescribers of higher doses of these two drugs.

The Board recommended that HID conduct a retrospective evaluation of contraindicated drug interactions with antiretroviral therapy and drug interactions for the new hepatitis C agents as well. Board members indicated that newer therapies for hepatitis C are under development and may be on the market in the next 18 to 36 months.

New Business

A live continuing education program sponsored by MMPP discussing diabetes and cardiovascular disease is scheduled for September 8, 2012 at St. Agnes Hospital auditorium.

There being no additional business, the meeting adjourned at 10:30.